

## SECONDHAND JEWELRY PERMIT APPLICATION

FEE: \$25.00

LICENSE YEAR: JUNE 1 THRU MAY 31

**RETURN TO:**

City Clerk's Office  
555 S. 10<sup>th</sup> St.  
Lincoln NE 68508

LMC Chapter 5.42

Required \$5,000 Surety Bond

***Please PRINT using blue or black ink.***

1) TYPE OF PERMIT:                      Established Dealer (    )                      Itinerant Dealer (    )

APPLICANT'S INFORMATION			
NAME:			
HOME ADDRESS:			
CITY:		STATE:	ZIP:
HOME PHONE #:			

BUSINESS INFORMATION			
NAME:			
LOCAL ADDRESS:			
ZIP:		PHONE #:	FAX #:
PERMANENT ADDRESS:			
ZIP:		PHONE #:	FAX #:

**TYPE OF BUSINESS:** \_\_\_\_\_

LOCATION WHERE BUSINESS WILL BE CONDUCTED			
NAME:			
STREET ADDRESS:			
ZIP:		PHONE #:	FAX #:

**BUSINESS HOURS:** \_\_\_\_\_

**HOW LONG WILL BUSINESS BE CONDUCTED IN LINCOLN:** \_\_\_\_\_

<b>LIST PRINCIPALS, AGENTS &amp; EMPLOYEES</b>			
<b>NAME</b>	<b>LOCAL ADDRESS (Include Zip Code)</b>	<b>PERMANENT ADDRESS (Include City, State &amp; Zip)</b>	<b>CAPACITY W/BUSINESS</b>

**HAVE FINGERPRINTS OF EACH PRINCIPAL, AGENT & EMPLOYEE BEEN ATTACHED:**

\_\_\_\_\_ Yes      \_\_\_\_\_ No

If No, explain: \_\_\_\_\_  
\_\_\_\_\_

**WITHIN 6 MONTHS OF THE DATE OF THIS APPLICATION, HAVE YOU CONDUCTED AN ITINERANT BUSINESS:** \_\_\_\_\_ YES \_\_\_\_\_ NO

**LIST THE PLACE(S) OF ITINERANT BUSINESS, STATING THE NATURE THEREOF, POST OFFICE, STREET ADDRESS, CITY OF ANY BUILDING OR OFFICES WHERE BUSINESS HAS BEEN CONDUCTED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STATE NATURE & CHARACTER OF ADVERTISING DONE OR PROPOSED TO BE DONE IN ORDER TO ATTRACT CUSTOMERS. INCLUDE THE NAMES OF THE MEDIA:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HAVE ANY OF THE PRINCIPALS, AGENTS OR EMPLOYEES OF THE BUSINESS BEEN CONVICTED OF ANY CRIME INVOLVING MORAL TURPITUDE:**

\_\_\_\_\_ YES      \_\_\_\_\_ NO

IF YES, LIST THE NAME(S) OF PERSONS, NATURE OF OFFENSE, WHERE IT OCCURRED & PUNISHMENT ASSESSED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARE YOU DOING BUSINESS FOR ANY PERSON, FIRM OR CORPORATION:**

\_\_\_\_\_ YES      \_\_\_\_\_ NO

IF YES, CREDENTIALS AUTHORIZING YOU TO ACT AS SUCH REPRESENTATIVE MUST BE ATTACHED.

IS THE NECESSARY BOND ATTACHED:      \_\_\_\_\_ Yes      \_\_\_\_\_ No

ARE YOU REQUESTING A TEMPORARY PERMIT PENDING FINAL REVIEW OF YOUR APPLICATION:

\_\_\_\_\_ YES      \_\_\_\_\_ NO

BOND & FEE REQUIREMENTS MUST BE MET BY APPLICANT PRIOR TO ANY PERMIT BEING ISSUED.

***Please sign in front of a Notary Public.***

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
PRINCIPAL

\_\_\_\_\_  
BY (SHOW CAPACITY)

SUBSCRIBED & SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_,  
\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

*Applications are available on the City's web site at "www.ci.lincoln.ne.us".*

## REFERRALS

### FIRE PREVENTION BUREAU:

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_

RECOMMENDATIONS OR COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### POLICE DEPARTMENT - LeAnn Hamner:

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_

RECOMMENDATIONS OR COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### POLICE DEPARTMENT - Sgt. Richard Kohles:

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_

RECOMMENDATIONS OR COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### CODES ADMINISTRATION:

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_

RECOMMENDATIONS OR COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_